MULTIPLE DEI DENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 AMENDMENT		AFTER 2 AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	-					
3	 	- - -		-		
4						
5						
6	<u> </u>					
7 8	 , 	\vdash				ļ
9	 			-		
10		7				
11						
12_		\dashv				
13 14						
15	 '		<u> </u>			
16						
17						
18	 					
19 20	-					
21						
22						
23						
24						
25 26						
27						
28						
29						
30						
31 32	-					
33						
34				•		
35						
36						
37						
38 39	 					
40						
41						
42	I			:		
43						
45						
46						
47						
48	Ţ					
49						
50	اسو	 1		 1		-
TOTAL IND.	<u>ب</u>	▼		▼ [▼
TOTAL DEP.		(-		•		(
TOTAL CLAIMS	16					
CLARITIO	14 1					

	ASE	TLED		TER		TER
	AS FILED		1" AME	NDMENT	2 [™] AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51			21,12,1	221.	1110.	DEI.
52	1			<u> </u>		
53	1			<u> </u>		
54						
55	 					
56						
57						
58	1					
59					_	
60						
61						
62						
63	1					
64						
65						
66						
67				-		
68						
69						
70						_
71						
72			_		-	
73						
74						
75					-	
76	-	***		_		_
77						
78	<u> </u>			-		
79	r i			-		
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90	-					
91						
92						
93						
94			Ì			
95						
96			T I			
97						
98		 				
99						
100					·	
				-		
TOTAL IND.		▼ [▼ [▼
TOTAL DEP.		(=		((=
TOTAL CLAIMS		; ;				
		I C DED DT				

PTO - 1360 (REV. 11/04)

U.S. DEPARTMENT of COMMERCE

Patent and Trademark Office